-	JB DOGM M/037/046			
	SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested. 1. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery			
	3. Article Addressed to:	(Extra charge) 4. Article Number		
	EARL E HOELLEN, PRES	P 074 976 579		
	INTERNATIONAL URANIUM (USA) CORP	Type of Service:		
	INDEPENDENCE PLAZA STE 950	Registered Insured		
1	1050 SEVENTEENTH ST	Certified COD Return Receipt		
	DENVER CO 80265	for Merchandise		
L		Always obtain signature of addressee or agent and DATE DELIVERED.		
1	5. Signature - Address	8. Addressee's Address (ONLY if		
1	x faule foriable	requested and fee paid)		
-	6. Signature - Agent			
L	X (/)			
L	7. Date of Delivery	HIH IN II III II		
PS Form 3811, Mar. 1988 (* U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT				

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.





PENALTY FOR PRIVATE USE, \$300

RETURN

TO



Print Sender's name, address, and ZIP Code in the space below.

Division of Oil, Gas and Mining 1594 West North Temple, Suite 1210 Box 145801

Salt Lake City, Utah 84114-5801

Andre de alle and Andre de And

P 074 976 579

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL

(See Reverse)

10001101007		3
Sent to EARL E HOELLE	alla.	
Street and PUNDEPENDENCE 1050 SEVENTER	PLAZA ENTH ST	JB
P.O., State and ZIP Code		
DENVER CO 802	200	
Postage	3	
Certified Fee		M/0
Special Delivery Fee		1/03//046
Restricted Delivery Fee)46
to whom A INFOF		
Return Receipt showing whom, Date and Address of Delivery		
TOTAL JUNE and 1997	5.45	
Postmess Sate		
1 14 14 14		

PS Form 3800, June 1985